

Fill in this information to identify the case:

Debtor name Mayville Holdings, LLC

United States Bankruptcy Court for the: EASTERN DISTRICT OF WISCONSIN

Case number (if known) _____

Check if this is an amended filing

Official Form 202

Declaration Under Penalty of Perjury for Non-Individual Debtors

12/15

An individual who is authorized to act on behalf of a non-individual debtor, such as a corporation or partnership, must sign and submit this form for the schedules of assets and liabilities, any other document that requires a declaration that is not included in the document, and any amendments of those documents. This form must state the individual's position or relationship to the debtor, the identity of the document, and the date. Bankruptcy Rules 1008 and 9011.

WARNING -- Bankruptcy fraud is a serious crime. Making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$500,000 or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571.

Declaration and signature

I am the president, another officer, or an authorized agent of the corporation; a member or an authorized agent of the partnership; or another individual serving as a representative of the debtor in this case.

I have examined the information in the documents checked below and I have a reasonable belief that the information is true and correct:

- Schedule A/B: Assets–Real and Personal Property* (Official Form 206A/B)
- Schedule D: Creditors Who Have Claims Secured by Property* (Official Form 206D)
- Schedule E/F: Creditors Who Have Unsecured Claims* (Official Form 206E/F)
- Schedule G: Executory Contracts and Unexpired Leases* (Official Form 206G)
- Schedule H: Codebtors* (Official Form 206H)
- Summary of Assets and Liabilities for Non-Individuals* (Official Form 206Sum)
- Amended Schedule*
- Chapter 11 or Chapter 9 Cases: List of Creditors Who Have the 20 Largest Unsecured Claims and Are Not Insiders* (Official Form 204)
- Other document that requires a declaration* _____

I declare under penalty of perjury that the foregoing is true and correct.

Executed on September 29, 2023

X /s/ Micheal Eisenga

Signature of individual signing on behalf of debtor

Micheal Eisenga

Printed name

Sole Member First American Properties

Position or relationship to debtor

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Debtor name	Mayville Holdings, LLC
United States Bankruptcy Court for the:	EASTERN DISTRICT OF WISCONSIN
Case number (if known):	_____

Check if this is an
amended filing

Official Form 204

Chapter 11 or Chapter 9 Cases: List of Creditors Who Have the 20 Largest Unsecured Claims and Are Not Insiders

12/15

A list of creditors holding the 20 largest unsecured claims must be filed in a Chapter 11 or Chapter 9 case. Include claims which the debtor disputes. Do not include claims by any person or entity who is an insider, as defined in 11 U.S.C. § 101(31). Also, do not include claims by secured creditors, unless the unsecured claim resulting from inadequate collateral value places the creditor among the holders of the 20 largest unsecured claims.

Name of creditor and complete mailing address, including zip code	Name, telephone number and email address of creditor contact	Nature of claim (for example, trade debts, bank loans, professional services, and government contracts)	Indicate if claim is contingent, unliquidated, or disputed	Amount of claim		
				Total claim, if partially secured	Deduction for value of collateral or setoff	Unsecured claim
Alliant Energy PO Box 3062 Cedar Rapids, IA 52406		Electricity (8/11/2023-9/13/2023)				\$2,632.46
Badger Pest Control, LLC N2082 County Rd K Watertown, WI 53098		Invoice 54881 Invoice 55672 Pest control services				\$240.00
Badger State Recovery, Inc. 305 HWY AA P.O. BOX 99 New Auburn, WI 54757		Invoice #61093				\$40.00
Corporate Business Systems 6300 Monona Dr., Suite C Madison, WI 53716		Copier charges				\$175.73
Delta Dental of Wisconsin PO Box 828 Stevens Point, 20 54481						\$776.82
First Unum Life Insurance Co. P.O. Box 406927 Atlanta, GA 30384		Group life and accident coverage				\$85.65
Genoa Healthcare 707 S. Grady Way Ste. 400 Renton, WA 98057		Disposal of used medical				\$242.87
GFL Environmental 26777 Central Park Blvd. Suite 255 Southfield, MI 48076		Trash and recycling services				\$952.83

Debtor **Mayville Holdings, LLC**
Name _____

Case number (*if known*) _____

Name of creditor and complete mailing address, including zip code	Name, telephone number and email address of creditor contact	Nature of claim (for example, trade debts, bank loans, professional services,	Indicate if claim is contingent, unliquidated, or disputed	Amount of claim If the claim is fully unsecured, fill in only unsecured claim amount. If claim is partially secured, fill in total claim amount and deduction for value of collateral or setoff to calculate unsecured claim.		
				Total claim, if partially secured	Deduction for value of collateral or setoff	Unsecured claim
Kaul Refrigeration, Inc. 1010 South Sprint Street P.O. Box 415 Beaver Dam, WI 53916		Invoice #018181				\$252.41
MCHS Ocucational Health P.O. Box 735249 Chicago, IL 60673		Employee service				\$59.10
Old National Bank P.O. Box 3728 Evansville, IN 47736		1175 Breckenridge St., Mayville, WI 53050		\$5,511,724.94	\$2,150,000.00	\$3,361,724.94